







"To care for him who shall have borne the battle and for his widow and his orphan."

> Abraham Lincoln, Second Inaugural Address



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Improving the effectiveness of communication among caregivers is an important aspect of patient safety.

Studies continue to show that a majority of adverse medical events involve communication-related issues. For example, in a study of



surgeons reporting adverse events in three teaching hospitals, 70% of the events involved two or more clinicians and 43%

involved communications breakdowns among personnel. (Gawande, Zinner, et al, 2003)

We use a multi-disciplinary team approach, known as Root Cause Analysis (RCA), to study health care-related adverse events and close calls.

Our aggregate RCA data provide insights on our communication vulnerabilities: only 23% of our treatment teams have shared and used patient assessments in a timely manner; just 24% of our frontline staff and managers/supervisors communicate patient issues on a routine basis — the same for intercommunication between frontline staff members. We found that "obstacle-free" communication of potential risks occurred only 12% of the time.

Collaboration and good communications in medicine has been proven to enhance patient safety and the quality of care.

For instance, better coordination among clinical staff has been associated with lower mortality rates in the Intensive Care Unit (Knaus et al, 1999); also, collaboration between physicians and nurses was related to better patient outcomes in Intensive Care units (Baggs et al, 1992).

Medical Team Training is focused on the application of aviation-based principles of Crew Resource Management (CRM) in healthcare. The fundamental concept of CRM is "using all available sources — information, equipment and people — to achieve safe and efficient operations."

CRM principles of communication include:

- cognitive flexibility
- team adaptation
- team technical skill
- situational awareness
- assertiveness
- collaboration
- coordination
- anticipation
- team leadership
- redundancy
- learning mechanisms

One of our goals is to develop effective team leaders who use communications as a key tool in providing quality patient care. Thus briefing and de-briefing are essential tools that we teach medical team leaders to use in order share and make sound decisions based on all the information and expertise available to them.

To enhance the entire team and promote information sharing, we conduct group exercises that cover a wide range of communication and team-building skills.

For instance, we believe that medical team members must have the ability to assert themselves when seeing a problem despite the fact that they may be working against an authority gradient.

We also train team members to eliminate ambiguous communication by using techniques like read back, repeat back, and call outs to expand a shared awareness of safety.

For more information, we suggest you read the Nov/Dec 2004 issue of TIPS: www.patientsafety.gov/tips.html.

We also recommend "Crew Resource Management and Its Applications in Medicine." Click to: www.ahrq.gov/clinic/ptsafety/chap44.htm

